

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Facility Information**

**Facility Name:** CLOSE TO HOME INC (510383)

**Address:** 1206 MARK AVE, TOMAH, WI 54660

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/01/1999

**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0096499      **End Date:** 02/28/2006      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0095241      **End Date:** 06/28/2005      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0094527      **End Date:** 03/16/2005      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0090820      **End Date:** 06/13/2003      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #10006288    Served 08/08/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.14(1)(a)	CLIENT RELATED TRAINING	10/16/2003	Yes
83.14(1)(d)	FIRE SAFETY, FIRST AID & CHOKING	10/16/2003	Yes
83.14(7)(b)	CONTINUING EDUCATION	10/16/2003	Yes
83.32(2)(a)1	PHYSICAL HEALTH	10/16/2003	Yes

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STATE OF WISCONSIN  
Bureau of Quality Assurance  
P.O. Box 2969  
Madison WI 53701-2969

**Enforcement History**

**Date: 08/08/2003      SOD #10006288      Appealed: No**

Sanctions

OTHER SANCTION

FORFEITURE---83.14(1)(a)

FORFEITURE---83.14(1)(d)

FORFEITURE---83.14(7)(b)

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**Complaint History**

**Date Complaint Received: 01/24/2006**

**Date Investigation Completed: 02/28/2006**

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE

Result

NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 01/24/2005**

**Date Investigation Completed: 03/16/2005**

Subject Area(s)

SUPERVISION

RESIDENT RIGHTS

NUTRITION & FOOD SERVICES

MEDICATIONS

ADMISSION, TRANSFER & DISCHARGE

STAFF ADEQUACY

PROGRAM SERVICES

QUALITY OF LIFE

Result

NOT SUBSTANTIATED

NOT SUBSTANTIATED

NOT SUBSTANTIATED

NOT SUBSTANTIATED

NOT SUBSTANTIATED

NOT SUBSTANTIATED

NOT SUBSTANTIATED

NOT SUBSTANTIATED

SOD #

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